

# FILE COPY

PATENT

Attorney Docket: P03999US8

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: PETER V. BOESEN, M.D. GROUP NO: 2643  
SERIAL NO: 09/870,807  
FILED: May 31, 2001  
FOR: CELLULAR TELEPHONE, PERSONAL DIGITAL ASSISTANT WITH  
VOICE COMMUNICATION UNIT

## REQUEST FOR CORRECTED FILING RECEIPT

Assistant Director for Patents  
Washington, D.C. 20231

Dear Sir:

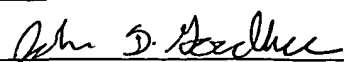
Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

There is an error with respect to the following data, which is incorrectly entered.

Error in	Correct data
1. THIS APPLICATION IS A CIP OF 09/587,743 06/05/2000 WHICH IS A CIP OF 09/416,168 10/11/1999	THIS APPLICATION IS A CIP OF 09/587,743 06/05/2000 WHICH IS A CIP OF 09/309,107 FILED 05/10/1999 AND ISSUED AS U.S. PATENT NO. 6,094,492 ON 07/25/2000.

## CERTIFICATE OF MAILING (37 C.F.R. § 1.8(a))

I hereby certify that this document and the documents referred to as enclosed therein are being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on this 26 June, 2001.

  
John D. Goodhue

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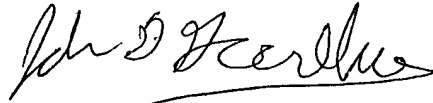
RECEIPT

#2  
11-1-01  
WB

If any fees are due, please charge our Deposit Account No.

26-0084.

Respectfully submitted,



JOHN D. ~~GOODHUE~~, Reg. No. 47,603  
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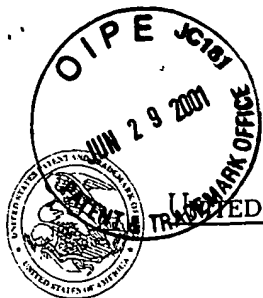
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- bja -

Attorneys of Record

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WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/870,807	05/31/2001	2643	404	P03999US8	3	21	4

CONFIRMATION NO. 2090

22885  
ZARLEY MCKEE THOMTE VOORHEES & SEASE PLC  
SUITE 3200  
801 GRAND AVENUE  
DES MOINES, IA 50309-2721

## FILING RECEIPT



\*OC000000006188397\*

Date Mailed: 06/15/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Peter V. Boesen, Des Moines, IA;

## Domestic Priority data as claimed by applicant

THIS APPLICATION IS A CIP OF 09/587,743 06/05/2000

WHICH IS A CIP OF 09/416,168 10/11/1999

and is issued as US Patent 6,094,492 on 7/25/2000.

## Foreign Applications

If Required, Foreign Filing License Granted 06/15/2001

Projected Publication Date: 09/27/2001

Non-Publication Request: No

Early Publication Request: No

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## Title

Cellular telephone, personal digital assistant with voice communication unit

## Preliminary Class

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381

Data entry by : SEDIQEE, AHMADULLAH

Team : OIPE

Date: 06/15/2001

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Bib Data Sheet

CONFIRMATION NO. 2090

<b>SERIAL NUMBER</b> 09/870,807	<b>FILING DATE</b> 05/31/2001 <b>RULE</b>	<b>CLASS</b> 381	<b>GROUP ART UNIT</b> 2643	<b>ATTORNEY DOCKET NO.</b> P03999US8
<b>APPLICANTS</b> Peter V. Boesen, Des Moines, IA;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 09/587,743 06/05/2000 WHICH IS A CIP OF 09/309,107 05/10/1999 PAT 6,094,492				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 06/15/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d), conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> IA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 22885				
<b>TITLE</b> Cellular telephone, personal digital assistant with voice communication unit				
<b>FILING FEE RECEIVED</b> 404	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	